

**HONDURAS:**

**REPRODUCTIVE HEALTH**

**WORKING GROUP**

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## **REPRODUCTIVE HEALTH WORKING GROUP**

### **SUMMARY**

The Reproductive Health Working Group (RHWG), a semi-formal forum of 65 reproductive health service delivery and policy organizations, meets monthly to exchange information and discuss professional topics. Begun in 1995, the group, which is coordinated by FRONTIERS, held 23 meetings between July 1999 and June 2001. An average of 45 people attended each session. About 150 staff members of member organizations have participated in the RHWG.

The main activities of the RHWG during the reporting period were: the review of *National Women's Health Service Delivery Guidelines*; publication of a *Declaration* statement supporting the *Guidelines* and responding to the attacks of conservative groups such as Prolife and the Catholic Church; presentation of 22 professional topics; and continued information exchange and inter-institutional collaboration facilitated by the RHWG.

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## **ACRONYMS**

ASHONPLAFA	Asociación Hondureña de Planificación Familiar (Honduran Family Planning Association)
AHLACMA	Asociación Hondureña de Lactancia Materna (Honduran Maternal Breastfeeding Association)
GTZ	German Technical Cooperation Agency
IEC	Information, education and communication
IPPF	International Planned Parenthood Federation
MOH	Ministry of Health
NGOs	Non-governmental organizations
PAHO	Pan American Health Organization
PC	Population Council
PRODIM	Programa de Desarrollo para la Salud de las Mujeres y los Niños (Health Development Program for Mothers and Children)
RHWG	Reproductive Health Working Group

## **ACKNOWLEDGMENTS**

We would like to thank all national private and government institutional members of the Reproductive Health Working Group (RHWG) for their interest, perseverance, support and active participation.

The participation and technical support of the international donor organizations is also gratefully acknowledged.

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## INTRODUCTION

In the late 1980s there was still a widespread opposition to family planning programs in Honduras, even among the medical professionals and government institutions as well as the conservative society at large. Although ASHONPLAFA (the local IPPF affiliate) was at the time almost the sole provider of family planning services in the country, a few other institutions, such as the Instituto Hondureño de Seguridad Social (IHSS), introduced (with the support of the Population Council's INOPAL I and II projects) contraception into their range of routine services and began to conceptualize family planning as an important tool for the protection of their clients' health.

In 1990 USAID issued two large contracts to help diversify the number of players in the family planning field and increase the density of service delivery points within the country. The first of these was given to Plan in Honduras, the local affiliate of Plan International, and the second was issued to the Population Council's INOPAL II operations research project. Plan in Honduras was required to carry out extensive training of MOH staff and community volunteers, in the hope that this training would help activate the previously dormant MOH program, while INOPAL II sought to introduce family planning into the programs of a large number of local and international NGOs. In the early 1990s, Save the Children, Care, and other smaller NGOs that had received training from AHLACMA as part of a project funded by the INOPAL II project, started to promote and provide family planning services in the rural areas of Honduras as part of larger reproductive health service packages. INOPAL II advised the participant institutions to adopt a reproductive health focus to complement their ongoing community health activities. This program focus predated the Cairo International Conference on Population and Development by nearly four years.

By 1994 the number of institutions and individuals participating in or interested in family planning/reproductive health programs had increased quite substantially. Population Council staff decided to host a reproductive health care conference. In the one-day conference, national and international institutions participating in reproductive health activities presented lectures and posters, displaying their IEC materials and service statistics, and shared training curricula. The conference was considered a success both because of the number of participants as well as because of their quality and enthusiastic participation.

In the meantime, attacks on family planning programs by conservative elements of the society (mostly from the Catholic Church, other conservative affiliated groups such as Prolife, and some professional medical associations) had persisted unchallenged, with disastrous effect in terms of the commitment of the Honduran government to family planning services.

In 1995 the Population Council resident advisor decided that instead of holding a second Reproductive Health Conference, a more permanent forum should be created for the discussion of reproductive health issues among professionals. Thus, the main service delivery, policy and donor organizations were invited to participate in monthly meetings

in which members or guest speakers made presentations on topics related to their programs or professional themes. During the first year, the Reproductive Health Working Group (RHWG), as it became known, had 37 members from 25 institutions, including Save the Children, World Neighbors, USAID, UNFPA, CARE, Population Council, Aldea Global, Project Hope, the MOH, World Vision, and several local Honduran NGOs such as ASHONPLAFA, AHLACMA, PRODIM as well as other smaller ones.

Until 1998, the Population Council was responsible for coordinating and holding the monthly meetings. However, later that year the group decided that each monthly meeting should be coordinated by a different organization, thus increasing the sharing of responsibilities and strengthening the institutionalization of the RHWG. This rotating host approach was maintained until the end of the reporting period.

In 1999 USAID provided funds to the Population Council/Frontiers in Reproductive Health Program to provide technical and financial assistance to the Reproductive Health Working Group. This report summarizes the activities conducted between July 1999 and June 2001.

## OBJECTIVES

The main objective of this project was to support the activities and monthly meetings of the RHWG. This support is justified by the objectives pursued by the RHWG, which are the following:

1. Promote the improvement of technical reproductive health skills through continuous training;
2. Design, propose and discuss national reproductive health care policies; and
3. Facilitate inter-institutional collaboration and information exchange.

## ACTIVITIES

Table 1 lists the six meetings carried out during the second half of 1999 and the 10 meetings held during the year 2000. An average of 45 people attended each of these meetings. The main issues discussed included the following:

**Review and discussion of the national reproductive health service delivery guidelines.** In December 1999 the MOH distributed a first printing of the *National Women's Health Service Delivery Guidelines*. The local chapter of Prolife and the Catholic Church protested several items expressed within these guidelines, including the use of social risk factors, counseling for adolescents on family planning, emergency contraception, sterilization for the mentally handicapped, and use of ages 10-49 as the fertile period. In February, the MOH requested the RHWG to prepare a public declaration

regarding the appropriateness of these guidelines. Three sessions were devoted to the analysis and writing of this declaration, which was published in two newspapers (see Appendix A) and the UNFPA bimonthly newsletter. The MOH decided not to change the norms and to review them again in five years time, as was originally planned. Thus, the RHWG served as a policy-consulting body, as designed.

**Structure of the RHWG.** The mission of the RHWG and the type of organization it should stand for were discussed in two meetings. Various alternatives such as becoming an NGO or a legally registered network of organizations were discussed and their implications analyzed. Organizational bylaws and statutes were drafted. However, the group did not reach a consensus and therefore decided to continue operating as before.

**Presentation of professional topics.** Topics for RHWG meetings included programs for adolescents and males, HIV/AIDS, contraception, use of the mass media for disseminating reproductive health information, operationalizing comprehensive reproductive health care issues, population and the environment, sexuality and religion, masculinity, integration of natural family planning into existing services, and organizational networks. These presentations helped to achieve the RHWG's objectives of information sharing and professional updating.

The meetings also helped to promote inter-institutional collaboration and information exchange. Examples of such collaboration are:

- ASHONPLAFA asked the Red de Desarrollo Sostenible (Network for Sustainable Development) to conduct a workshop on the dissemination of research results to policymakers.
- GTZ hired Marie Stopes to train nurse auxiliaries in reproductive health care counseling.
- MOH officials invited several RHWG members to review and comment on their planned reproductive health mass media campaign.
- As a consequence of the presentation on the use of mass media, RHWG members identified anchor news people to help disseminate reproductive health information. Group members gave information to these journalists, resulting in the publication of many news items. Appendix B lists copies of 18 newspaper articles clipped by PC staff. These clippings are taken from two of the five local newspapers. Actual coverage was more extensive.

**Continued growth.** During 2000 the group continued to expand. Total membership increased to 65 organizations represented by about 150 professionals (see Appendix C). New participants include the Colectivo de Masculinidad (Masculinity Collective), the Asociación de Mujeres Negras (Association of Black Women), Visitación Padilla, Colectivo contra la Violencia (Collective Against Violence), Hombres Sin Rostro (Men without Faces), and Prisma.

## **CONCLUSIONS AND RECOMMENDATIONS**

The RHWG has been valuable in helping to consolidate reproductive health issues within the professional field in Honduras. The group has allowed different institutions to get to know each other better, collaborate in concrete activities and tap their particular expertise. It has also served as a policy forum. Governmental programs have asked the group to review draft policy documents, including service delivery guidelines, and to present a unified technical front to attacks by conservative groups, which often use unscientific assertions to discredit programs and policies.

The group continues to be dependent on outside sources for its funding. Thus, during the next year, the challenge of self-sufficiency needs to be met. This self-sufficiency should not only be financial and organizational, but also legal, in the sense that the RHWG should be incorporated as a civil organization. The group has not held any meetings since January 2001, and thus these issues have not been resolved.

Even if the group continues, a second challenge is to continue expanding the work of the RHWG in order to maintain the interest of its participants. One promising area is to have a closer interaction with the mass media in order to use this communication channel as a means to disseminate reproductive health information and help change the social acceptability of these topics as subjects of discussion. Media coverage could increase recognition that reproductive health programs are valuable tools to protect the health of the population.

**Table 1. RHWG Meetings July 1999 – December 2000**

Dates	Topics	Institution
July 22, 1999	Adolescent mother clinic at the Hospital Escuela Save the Children's experience with adolescent integral care	Save the Children Hospital Escuela
August 19, 1999	Prevalence of syphilis, hepatitis and HIV among pregnant women attending prenatal care, sex workers, homosexuals, bisexuals and other risk groups.	MOH Dept. of ETS/SIDA/TB
September 23, 1999	How to use radio, TV and the printed press to disseminate reproductive health information	Population Council
October 28, 1999	Men's Health Survey Results Counseling violent men at the MOH	Population Council
November 18, 1999	Operationalizing Reproductive Health. A public health perspective.	PRAIM/GTZ - Maestría en Salud Pública
December 16, 1999	Integrating natural family planning into reproductive health programs.	RENAFE-MOB
January 20, 2000	Reorganization of the RHWG	MOH and Frontiers
February 3, 2000	Analysis and discussion of National Women's Health Service Delivery Guidelines.	MOH and Frontiers
March 23, 2000	Analysis and discussion of National Women's Health Service Delivery Guidelines.	PAHO
April 27, 2000	Consensus of the RHWG on the Service Delivery Guidelines for Women's Health Care	GTZ
June 22, 2000	Reorganization of the RHWG	Population Council
July 20, 2000	Population and environment	RDS, Save the Children and Frontiers
August 24, 2000	Sexuality and religion	Auxilio Mundial
September 22, 2000	Networks	GTZ
October 28, 2000	Masculinity	Men's Collective
December 16, 2000	Integration of natural family planning	RENAFE
December 16, 2000	Christmas gathering	Population Council

## **APPENDIX A**

### **Declaration on National Women's Health Service Delivery Guidelines**

(Published in *El Heraldo* and *La Tribuna* newspapers, Tegucigalpa, March 23, 2000)

#### **DECLARACION DEL GRUPO DE TRABAJO DE SALUD REPRODUCTIVA SOBRE LAS POLITICAS DE SALUD SEXUAL Y REPRODUCTIVA**

Nosotros, el Grupo de Trabajo de Salud Reproductiva (GTSR), somos una organización interinstitucional, conformada por más de 50 organizaciones públicas y privadas prestando servicios en el campo de Salud Sexual y Reproductiva. Nuestro propósito es impulsar procesos que mejoren las condiciones de salud en Honduras.

El grupo tiene cinco años de funcionamiento, y surge como una necesidad de contar con un espacio amplio y abierto de reflexión, discusión y crecimiento individual e institucional. El enriquecimiento resultante del intercambio de visiones y experiencias, nos permite contribuir con propuestas y posicionamientos de importancia para el país..

Nuestra actividad principal se desarrolla en el marco del fortalecimiento de los derechos humanos, específicamente a los relacionados con la Salud Sexual y Reproductiva, y contribuir así al desarrollo humano sostenible. Estamos propiciando abordajes cada vez más integrales en este campo, tomando en consideración el contexto socio-cultural y la diversidad de nuestra población.

#### **¿Cómo es la situación de Salud Reproductiva en nuestro país?**

La evidencia de que en Honduras debemos mejorar en SSR es que según fuentes de la Secretaría de Salud, nos encontramos dentro de los primeros cinco países en América Latina donde más mueren las mujeres a causa de su maternidad. Es importante considerar que uno de cada cuatro embarazos no ha sido deseado y que la cobertura estatal en planificación familiar es sólo del 10% de la demanda. Por otro lado, una de cada diez muertes maternas se relaciona con complicaciones del aborto. A pesar de importantes avances, en la actualidad, sólo la mitad de las mujeres son atendidas en sus partos en instituciones de salud. El embarazo en nuestras adolescentes adquiere cada vez más relevancia, observándose que el 40% de los partos atendidos en el Hospital Escuela corresponde a madres adolescentes. El 30% de las muertes infantiles en menores de 1 año en Honduras está vinculado a problemas de salud reproductiva. Aunque no contamos con cifras exactas, es evidente las dimensiones tremendas que alcanza la violencia doméstica y el abandono infantil. El SIDA se ha convertido en una de las principales causas de

muerte en mujeres en edad reproductiva. Más de 60.000 personas en Honduras están infectadas con el virus del VIH, alcanzando la tasa más alta en todo Centroamérica.

### **Las Políticas en SSR: un paso contundente**

Honduras, en los últimos años, ha evolucionado, desde un enfoque materno-infantil y de planificación familiar, a un planteamiento integral, incluyente de hombres y mujeres que promueve la toma de decisiones oportunas e informadas para el logro de una vida sexual y reproductiva saludable, responsable, digna y consciente.

En ese sentido, uno de los logros más significativos que ha tenido el país en los últimos tiempos es la promulgación de las Políticas Nacionales de Salud Sexual y Reproductiva, publicadas por la Secretaría de Salud en el mes de noviembre de 1999.

Dichas políticas, se fundamentan en el amplio concepto de Salud Sexual y Reproductiva, que básicamente impulsa el derecho de todas las personas a vivir su sexualidad con satisfacción y a decidir libremente sobre cuántos hijos y cuándo los quieren tener. Para ello, todas las personas tienen el derecho a estar correcta y ampliamente informadas y el deber de respetar la dignidad de los demás y de actuar con responsabilidad, evitando, para sí mismos, su pareja y su futura descendencia, posibles riesgos de enfermar y/o morir.

### **¿Qué significa todo esto?**

- *Decidir libremente* implica que nadie debe sufrir coacción psicológica o física. Para ello, es necesario promover la igualdad y el respeto entre hombres y mujeres en términos de equidad.
- *Estar correcta y ampliamente informados* implica tener acceso a la información necesaria para poder actuar en función del bienestar personal y del grupo social.
- *Debe de actuar con responsabilidad para evitar los riesgos de enfermarse o morir*, implica el respeto a los derechos de los demás, así como acceder y utilizar servicios integrales que incluyan, consejería y educación, prevención de enfermedades como ETS-SIDA, Cánceres de aparato reproductivo de hombres y mujeres, planificación familiar, Nutrición, Atención integral del embarazo, parto y posparto.

La operativización de estas políticas debe traducirse en la promoción más efectiva de una participación consciente y comprometida hacia comportamientos más saludables. De igual forma se incorporarán los enfoques y las acciones necesarias para alcanzar la equidad entre mujeres y hombres. Además, se ofrecerán servicios con mayor calidad técnica y mejor trato humano (calidez) y se apoyará a la mayor descentralización, favoreciendo la colaboración entre diferentes instituciones y sectores de la sociedad.

### **Por lo tanto...**

El Grupo de Trabajo de Salud Reproductiva, se pronuncia en los siguientes términos:

- Reconoce la relevancia que tiene la aprobación de las Políticas de Salud Sexual y Reproductiva, por parte de la Secretaría de Salud, para el bienestar de la población Hondureña, dentro del marco de la política general de desarrollo humano;
- Apoya las Políticas de Salud Sexual y Reproductiva y todas las normas y procedimientos que permitan operativizarlas;

- Insta a todas las dependencias gubernamentales y no gubernamentales, así como a las agencias de cooperación a asignar los recursos necesarios en forma coordinada para lograr la operatividad de éstas políticas;
- Se compromete a vigilar, abogar y dar seguimiento al cumplimiento de las mismas a través de acciones concretas.

## **APPENDIX B**

### **Press Articles Generated by RHWG Members**

1. Agria polémica crean políticas de salud sexual y reproductiva (*Heraldo*, January 7, 2000)
2. Salud se reunirá con iglesias para tratar tema sexualidad reproductiva
3. Salud sexual y reproducción (*Heraldo*, February 7, 2000)
4. Métodos anticonceptivos de emergencia (*La Tribuna*, January 17, 2000)
5. Mujeres pueden acudir a la anticoncepción de emergencia
6. Mortalidad materno infantil se redujo durante año pasado
7. Ayúdanos a salvar vidas con el control prenatal posparto y la planificación familiar (*Tribuna, Heraldo, Prensa, Tiempo* – March to June, 2000)
8. Una mujer muere en Honduras cada 31 horas por problemas de parto (*Heraldo*, March 29, 2000)
9. Cobertura de planificación familiar es solo del 10% de la demanda (*La Tribuna*, March 2000)
10. Proyecto de salud reproductiva en apoyo a la Secretaria de Salud
11. El SIDA esta diezmando población activa del país (*Heraldo*, April 5, 2000)
12. Salud lanza campaña para prevenir muerte materna (*Tribuna*, June 21, 2000)
13. Derechos sexuales de las mujeres debaten en la Secretaría de Salud (June 6, 2000)
14. Salud reorganizará la atención materno infantil en hospitales (*Heraldo*, June 10, 2000)
15. El 40% de niñas hondureñas de 14 años ya tienen un hijo (*La Tribuna*, July 10, 2000)
16. Se reconoce la labor educativa del Heraldo (*Heraldo*)
17. Los anticonceptivos de emergencia
18. Proponen reforma curricular en las carreras del área de salud (*Heraldo*, November 2, 2000)

## APPENDIX C

### List of Reproductive Health Working Group Members

#### GOVERNMENT AGENCIES

INSTITUCION	NOMBRE Y CARGO	DIRECCION, TEL., FAX , E-MAIL
Escuela de Enfermería, UNAH	Chrystabel Parchment Coordinadora General Licda. María Isabel Rodezno Licda. Lourdes Amador	Edificio de la Facultad de Medicina, Tercer Piso, frente al Hospital Escuela Tel: 232-8579 Tel: 239-5885
Hospital Escuela	Dr. Leonel Pérez Jefe Depto. Ginecoobstetricia	Hospital Escuela, Bloque Materno Infantil, 5to. Piso. Tel. 232-3000
Instituto Hondureño de Seguridad Social, (IHSS)	Dr. Angel Pineda Dept. Ginecoobstetricia	Col. La Granja Edificio del IHSS, Comayaguela Tel:225-0111, 225-2112

#### MINISTERIO DE SALUD PUBLICA Barrio El Centro Tegucigalpa

División de Estadísticas	Georgina Díaz	Tels.222-5771 ext. 1009, 222-8522
Dept. Materno Infantil, Unidad de Atención a la Mujer	Jorge Humberto Meléndez Elida Aguilar Ivo Flores	Tels. 222-5771 ext. 1095 222-1257
Sub Secretaría de Riesgos Poblacionales	María Eugenia Lanza Enriqueta López	Tel. 238-3917 222-5771 ext. 1092-1093
Dept. Salud Mental	Irma Donaire	Tels. 222-5772, 222-0466
Dept. ETS/SIDA	Bertha Alvarez Miriam Carpio	Tels. 237-3155 237-4343

#### REGION SANITARIA METROPOLITANA SECRETARIA DE SALUD

Región Sanitaria Metropolitana	Nerza Paz Ruth Medina Regina Sierra Suyapa Prudoth Gustavo Ramírez Juana Ávila Hipólito Pavón	Tels. 232-7920, 232-1135
	Reproductive Health Working Group	13

	María Castillo Jefe Area No. 1 Oscar Reyes Jefe Area No. 2 Nora de Mendoza Eda Graciela Aguilera Luis Medina Martha de Banegas Dagoberto Torres Oswaldo Guifarro Mireya Mineros Hermes Reyes Elvia de Medina Cándida Verderame Billy Gonzales	
Región Sanitaria No. 1	Julio César Arita Behula Aguilar Rubenia Velásquez Dra. Belinda Vásquez	Costado Este del Hospital San Felipe Tel. 236-7157
Maestría en Salud Pública	Licda. Eva Luz de Alvarado Licda. Astarté Alegría Licda. María Elena Cáceres Licda. Emilia Alduvín	Edificio de la Facultad de Ciencias Médicas, contiguo al Hospital Escuela. Tel. 239-1977
Instituto Nacional del Tórax	Licda. Liliana Mejía	Edificio JICA.
Medicina Preventiva, UNAH	Brenda Meléndez	
Dept. De Alimentación y Nutrición	Ana María Lozano Nalda Gómez	

#### NON-GOVERNMENTAL AGENCIES

INSTITUCION	NOMBRE Y CARGO	DIRECCION, TEL., FAX , E-MAIL
ADRA	Blanca Esther Hidalgo Coordinadora de Salud Nelson Tabares	Col. Miraflores sur, bloque 46-A, Casa #3937, 4 casas hacia arriba del Autolote Miraflores, Tel. 230-1359, 1223, 1652, Fax: 228-4934
ASHONPLAFA	María de los Angeles Barahona María Elena de Pérez Dept. de Capacitación Manuel Sandoval	Col. Alameda No. 2002, Ave. Juan Manuel Gálvez, Calle Arturo López Rodezno. P.O.BOX 625. Tel: 232-3959, 232-6449 Fax: 232-5140
Centro de Estudios de la Mujer	María Elena Méndez Directora Ejecutiva Mirtha Kennedy	Col. Palmira, frente redondel José Antonio Velásquez, Casa No. 642. P.O.BOX 3543 Tel. 232-6301
Centro de Derechos de Mujeres	Licda. Gilda María Rivera Directora Ejecutiva Regina Fonseca Colectivo contra la violencia	Col. Lara Norte, No. 823 Tel. 221-0459 y 221-0657
Save the Children Británico	Vita Randazzo	Col. Palmira, Tels: 239-9930

PRODIM	Sadith Cáceres Javier Cálix	Col. Palmira, Tegucigalpa, Apartado Postal. 2015 Tel. 232-7540, 235-9417
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Proyecto HOPE	Lic. Andrés Morazán	Col. Humuya, 1ra. Calle, Casa No. 1037 Contiguo a Divisa/DERIMASA Tel. 239-2667 Fax: 239-2534
CEVIFA (Centro para la Educación en la Vida Familiar)	María Elena de Quan Directora Ejecutiva	3er. Piso, Edificio JS, frente a la Iglesia la Guadalupe, Boulevard Morazán, Tel/Fax. 239-6823
Save the Children de Honduras	Dr. José Ramón Díaz Elizabeth Sánchez	Col. Alameda, Avenida Julio Lozano Díaz, 10 y 11 calle, No. 1314. P.O.BOX 333 Tel. 231-0958 Fax: 232-5869
UNISA	Sandra Zepeda	Calzada la Leona, Casa No. 1414, contiguo al Colegio Atlántida P.O.BOX 1003 Tel: 234-1504, 222-8240, 238-0295
Vecinos Mundiales	Alicia Medina Miriam Romero	Col. Miraflores Norte, 3ra. Avenida Bloque 60, Casa No. 1840 Apartado Postal No. 3385 Tel. 230-2003, 230-2005
Proyecto Alternativas y Oportunidades	Dra. Lizeth Coello Licda. Norma Chávez	Frente a edificio de la Antigua Casa Presidencial. Tel: 238-6905
Colectivo de Masculinidad “Hombres sin Máscara”	Edmundo Pérez	P.O.BOX 3126 Tel. 255-2659
ITCC (Instituto Técnico para la Cooperación Comunitaria)	Clementina García Directora	Col. Alameda, 2da. Avenida. Tel. 232-5268
CESADEH	Arlex Reyes Director	Edif. Francia, 3er piso Tel. 239-1021
Asociación ANDAR	Jackie Scherrman	Col. Las Colinas, 3ra. Entrada, 3ra. Casa a mano derecha. Tel. 232-8356
Acciones para el Desarrollo Poblacional (A. D. P.)	Emma Mejía Directora	Barrio Casamata, Calle principal, contiguo al Colegio Penzotti, casa No. 1402. Tel/Fax: 237-3353
Hogar de Orientación Materno Infantil (HOMI)	Elvia Sabina Torres	Col. La Campaña, 4 cuadras hacia adentro de Tienda Su Venta, Antiguo Local de Laboratorio del Pani Tel/Fax 213-8196
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PROHAUGEM	Licda. Aida Castillo	Primer piso de la Facultad de Ciencias Médicas, Contiguo al Hospital Escuela

Auxilio Mundial	Dr. Henry Andino Dr. Mario Ramos	Col. Las Minitas por la Embajada de Guatemala, Casa No. 734-17 Tel. 232-4578, 232-7667
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ENMUNEH (Enlace de Mujeres Negras de Honduras)	Bertha Arzú	Col. Palmira, Sendero Pinalejo, Edificio Francia (tras de edificio Italia), 2do piso No. 4. Tel. 239-3755, Fax: 239-3756
ASD (Ambiente, Salud y Desarrollo)	Dr. Carlos Villalobos Licda. Alba Lidia Sánchez	Barrio La Plazuela, frente a Banco Futuro
Proyecto Solidaridad y Vida	Enoc Padilla	Barrio Belén, Boulevard del Norte
Colectivo de Mujeres Universitarias	Fanny Moncada	
PREDISAN	Dra. Amanda Madrid	Catacamas, Olancho. Tel: 899-4341

#### DONORS AND TECHNICAL ASSISTANCE AGENCIES

INSTITUCION	NOMBRE Y CARGO	DIRECCION, TEL., FAX , E-MAIL
F N U A P Proyecto de Riesgo Reproductivo y Salud de la Mujer	Sandra Barahona Maritza Isabel Elvir Oficial de Programas Cecilia Maurente Ritzá Avilez	Casa de las Naciones Unidas, Col. Palmira Tel: 220-1100, 220-1102 Fax: 232-8716
GTZ-PRAIM	Carmen Pérez María Elena Ordóñez Emma Iriarte	Col. Castaño Sur, Ave Castaño No. 2911. Apartado Postal No 3637 Tegucigalpa Tel/Fax: 235-8130
Proyecto SPAH	Sandra Alvarez Bernard Schlecht	Col. Tepeyac, Ave. Luis Bográn, No. 1034. Tel. 239-9844, Fax. 232-2746
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